

# SAMPLE

## AUTHORIZATION AGREEMENT FOR AUTOMATIC DEBITS (ACH DEBITS)

STATE OF ALABAMA

AGENCY: Department of \_\_\_\_\_

I (we) hereby authorize State of Alabama, Department of \_\_\_\_\_, hereinafter called STATE, to initiate debit entries and to initiate, if necessary, credit entries and adjustments for any debit entries in error to my (our) \_\_\_\_\_ Checking \_\_\_\_\_ Savings account (select one) indicated below and the bank named below, hereinafter called BANK, to debit and/or credit the same to such account.

MY BANK  
NAME \_\_\_\_\_ BRANCH \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TRANSIT/ABA NO. \_\_\_\_\_ ACCOUNT NO. \_\_\_\_\_

This authority is to remain in full force and effect until STATE has received written notification from me (or either of us) of its termination in such time and in such manner as to afford STATE and BANK a reasonable opportunity to act on it.

NAME(S) \_\_\_\_\_  
(PLEASE PRINT)

DATE \_\_\_\_\_ SIGNED X \_\_\_\_\_

SIGNED X \_\_\_\_\_

\*\*\*\*\* ATTACH A VOIDED CHECK\*\*\*\*\*